

## City of Clear Lake Shores

1006 South Shore Drive Clear Lake Shores, Texas 77565 Phone: 281-334-2799 Fax: 281-334-2866 www.clearlakeshores-tx.gov

## **Contractor Registration Form**

Company Name:							
Business Address: (physical)							
	City		State		Zip		
Mailing Address: (if different	from above)						
			Curt		7:		
Company Phone Number:	City		State		Zip		
Contact name:	Contact Cell Phone:						
Company/Contact Email Adda	ess:						
Contact Drivers License:	Exp Date:						
Type of Contractor: (please ci	rcle) General	Plumbing	Mechanical	Electrical	Pool	Landscape	Roofing
Texas State License: (if applicable)			Exp Date:				
Persons authorized to obtain p	ermits in the na	ame of the co	mpany:				
			_				
			_				
			_				
Date:			_				
Signature:			_				
Print Name:			_				
ING	COMPLETE A	PPLICATION	NS WILL <u>NOT</u>	BE PROCE	SSED		
Assigned Contractor ID#:			C	ontractor Re	gistration	n Fee: \$25.00	
Accepted By:			*Plumbing Contractors exempt from this fee*				
Date Form Received:							